## Filing Date **CLAIMS ONLY** Applicant(s) May be used for additional claims or amendments CLAIMS AFTER FIRST AMENDMENT Indep Depend AFTER SECOND AMENDMENT Indep Depend AS FILED Indep Depend Indep Depend Indep Depend 52 56 57 12 13 14 15 16 17 63 65 20 21 22 71 73 74 75 76 77 78 24 26 27 80 31 32 34 85 37 .86 45 95 - 96 47. Total Total

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